

10/824,838

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

~~AMURA-10~~

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|---------------|--------------|
| TOTAL CLAIMS | 84 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 84 minus 20 = | 64 |
| INDEPENDENT CLAIMS | 6 minus 3 = | 3 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

1-16-07

| | (Column 1) | (Column 2) | (Column 3) |
|---|------------|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 84 | Minus | 84 |
| Independent | 5 | Minus | 5 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 385.00 |
| X3 9= | 576 |
| X43= | 129 |
| +145= | |
| TOTAL | 1090 |

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 770.00 |
| X318= | |
| X86= | |
| +290= | |
| TOTAL | |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|----------------|----------------|
| X3 9= | |
| X43= | |
| +145= | |
| TOTAL | |
| ADDITIONAL FEE | |

| RATE | ADDITIONAL FEE |
|----------------|----------------|
| X318= | |
| X86= | |
| +290= | |
| TOTAL | |
| ADDITIONAL FEE | |

| RATE | ADDITIONAL FEE |
|----------------|----------------|
| X3 9= | |
| X43= | |
| +145= | |
| TOTAL | |
| ADDITIONAL FEE | |

| RATE | ADDITIONAL FEE |
|----------------|----------------|
| X318= | |
| X86= | |
| +290= | |
| TOTAL | |
| ADDITIONAL FEE | |

7-16-07

| | (Column 1) | (Column 2) | (Column 3) |
|---|------------|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 65 | Minus | 84 |
| Independent | 6 | Minus | 6 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|------------|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | | Minus | |
| Independent | | Minus | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- * The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.